

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|--|--|--------------------------------|--------------|------------|
| AL | ALABAMA | | | | | |
| PHP | dba Altacare of Dothan 348 Healthwest Drive Dothan, AL 36303 EIN: 63-6004476 PHONE: (334) 794-4582 | Adolescent Full-Day Child Half-Day Adult Full-Day | M/F M/F M/F | 4 4 12 | 03/19/2001 | |
| CA | CALIFORNIA | | | | | |
| PHP | dba Alvarado Parkway Institute, BHS Helix Healthcare, Inc. 7050 Parkway Drive La Mesa, CA 91942 EIN: 80-0062662 PHONE: (619) 465-4411 | Adult PHP Full Day | M/F | 30 | 12/22/1994 | 04/09/2002 |
| PHP | dba Aurora Behavioral Health Care/San Diego Aurora San Diego, LLC 11878 Avenue of Industry San Diego, CA 92128 EIN: 94-3369426 PHONE: (858) 487-3200 | Adolescent Full Day | M/F | 20 | 01/13/1995 | 02/15/2002 |
| PHP | dba Heritage Oaks Hospital BHC Heritage Oaks Hospital, Inc. 4250 Auburn Blvd. Sacramento, CA 95841-4100 EIN: 62-1658494 PHONE: (916) 489-3336 | Adult Full Day | M/F | 50 | 10/25/1995 | 12/07/2001 |
| PHP | dba San Diego Center for Children San Diego Center for Children 3002 Armstrong Street San Diego, CA 92111 EIN: 95-1661089 PHONE: (858) 277-9550 | Child/Preadolescent Full Day | M/F | 18 | 12/16/1993 | 04/26/2001 |
| PHP | dba Sharp Mesa Vista Hospital 7850 Vista Hill Avenue San Diego, CA 92123 EIN: 95-3782169 PHONE: (858) 278-4110 | Child Psych Full Day Adolescent Psych Full Day Adolescent Eating Disorder Full Day Adult Eating Disorder Full Day Adult Psych Half Day Adult Cognitive Half Day | M/F M/F M/F M/F M/F M/F | 10 16 6 6 34 16 | 12/12/1994 | 12/07/2001 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|---------------------------------------|------------|----------|--------------|------------|
| CT | CONNECTICUT | | | | | |
| PHP | dba Joshua Center - Brooklyn Natchaug Hospital Inc. 7 Providence Road Brooklyn, CT 06234 EIN: 06-0966963 PHONE: (860) 779-2101 | Adolescent Half Day Child Half Day | M/F M/F | 15 15 | 12/19/1994 | 08/13/2002 |
| PHP | dba Joshua Center - Mansfield Natchaug Hospital Inc. 189 Storrs Road Mansfield Center, CT 06250 EIN: 06-0966963 PHONE: (860) 456-1311 | Adolescent Half Day Child Half Day | M/F M/F | 15 15 | 12/14/1994 | 08/13/2002 |
| PHP | dba Joshua Center - Montville Natchaug Hospital Inc. 20 Maple Avenue Uncasville, CT 06382 EIN: 06-0966963 PHONE: (860) 848-3098 | Adolescent Half Day Child Half Day | M/F M/F | 15 15 | 12/20/1994 | 08/13/2002 |
| PHP | dba Quinebaug Day Treatment Center Natchaug Hospital Inc. 320 Pomfret Street Putnam, CT 06260 EIN: 06-0966963 PHONE: (860) 963-6416 | Adult Half Day | M/F | 30 | 08/13/1999 | 08/13/2002 |
| PHP | dba Rivereast Day Hospital & Treatment Center Natchaug Hospital Inc. 28 Hartford Turnpike Vernon, CT 06066 EIN: 06-0966963 PHONE: (860) 456-1311 | Adult Half Day | M/F | 32 | 12/19/1994 | 08/20/2002 |
| PHP | dba Sachem House Natchaug Hospital Inc. 189 Storrs Road Mansfield Center, CT 06250 EIN: 06-0966963 PHONE: (860) 456-1311 | Adult Half Day | M/F | 30 | 10/08/2002 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|-------------------------------------|--------|-----|--------------|------------|
| DC | DISTRICT OF COLUMBIA | | | | | |
| PHP | dba Psychiatric Institute of Washington Wisconsin Avenue Psychiatric Center, Inc. 4228 Wisconsin Avenue, NW Washington, DC 20016 EIN: 52-1907007 PHONE: (202) 885-5600 | Lambda PHP full day | M/F | 10 | 12/20/1994 | 10/04/2002 |
| | | The Day Center PHP full day | M/F | 10 | | |
| | | Adult Dual Diagnosis PHP full day | M/F | 20 | | |
| DE | DELAWARE | | | | | |
| PHP | dba Rockford Center Universal Health Services of Rockford, Inc 100 Rockford Drive Newark, DE 19713 EIN: 23-3044421 PHONE: (302) 996-5480 | Adult PHP Full Day | M/F | 45 | 10/03/2003 | |
| | | Adolescent PHP Half Day | M/F | 30 | | |
| | | Child PHP Half Day | M/F | 15 | | |
| FL | FLORIDA | | | | | |
| PHP | dba Baptist Behavioral Health Baptist Medical Center 800 Prudential Drive Jacksonville, FL 32207 EIN: 59-0747311 PHONE: (904) 202-2296 | Psychiatric PHP Full Day | M/F | 12 | 12/02/2002 | |
| PHP | dba Ten Broeck Hospital-Jacksonville United Medical Corporation Ten Broeck Hospital 6300 Beach Blvd Jacksonville, FL 32216 EIN: 59-3568978 PHONE: (904) 724-9202 | Adolescent PHP Full Day | M/F | 30 | 12/12/1994 | 08/16/2001 |
| | | Adult PHP Full day | M/F | 30 | | |
| PHP | dba Wolfson Children's Hospital at Baptist Medical Ctr 800 Prudential Drive Jacksonville, FL 32207 EIN: 59-0747311 PHONE: (904) 202-4959 | Behavioral Health Day Stay Full Day | M/F | 10 | 12/02/2002 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|--|------------------------|----------------------|--------------|------------|
| GA | GEORGIA | | | | | |
| PHP | dba Bradley Center of St. Francis, The St. Francis Hospital, Inc. 2000 16th Avenue Columbus, GA 31901 EIN: 58-0641240 PHONE: (706) 320-3700 | Adolescent Day Hospital Full Day Adult Full Day Child Day Hospital Full Day | M/F M/F M/F | 16 12 8 | 10/29/1993 | 03/28/2002 |
| PHP | dba Ridgeview Institute 3995 South Cobb Drive Smyrna, GA 30080 EIN: 58-2077522 PHONE: (800) 329-9775 | Adult Full Day Adolescent Full Day Child Full Day Adolesc/Adult Female Full Day | M/F M/F M/F F | 45 25 10 18 | 11/08/1993 | 02/14/2003 |
| HI | HAWAII | | | | | |
| PHP | dba Kahi Mohala Behavioral Healthcare Sutter Health Pacific 91-2301 Fort Weaver Road Ewa Beach, HI 96706 EIN: 99-0298651 PHONE: (808) 671-8511 | Child Half-Day Adolescent Half-Day | M/F M/F | 8 8 | 06/20/2000 | 05/01/2003 |
| ID | IDAHO | | | | | |
| PHP | dba Intermountain Hospital BHC Intermountain Hospital, Inc. 411 N. Allumbaugh Street Boise, ID 83704 EIN: 62-1658493 PHONE: (208) 377-8400 | Adult Full Day | M/F | 20 | 10/19/1993 | 03/09/2004 |
| IL | ILLINOIS | | | | | |
| PHP | dba Southern Illinois Behavioral Services Perry County Counseling Center, Inc. 1110 Cedar Court Carbondale, IL 62901 EIN: 37-6130900 PHONE: (618) 542-4357 | Adult Full-Day | M/F | 10 | 02/14/2002 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|--------------------------------|--------|-----|--------------|------------|
| KY | KENTUCKY | | | | | |
| PHP | dba CARITAS Peace Center CARITAS Health Services 2020 Newburg Road Louisville, KY 40205 EIN: 61-1130025 PHONE: (502) 451-3330 | Child Full day | M/F | 8 | 05/19/1994 | 05/10/2002 |
| | | Pre-Teen Full Day | M/F | 8 | | |
| | | Adolescent Full Day | M/F | 8 | | |
| | | Transitions Adult PHP Half Day | M/F | 20 | | |
| PHP | dba Ten Broeck Hospital at Dupont Ten Broeck at Dupont 1405 Browns Lane Louisville, KY 40207 EIN: 59-3658521 PHONE: (502) 896-0495 | Adult PHP Half-Day | M/F | 10 | 03/22/2004 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|--|--------|-----|--------------|------------|
| MD | MARYLAND | | | | | |
| PHP | dba Calvert Memorial Hospital Calvert Memorial Hospital 100 Hospital Road Prince Frederick, MD 20678 EIN: 52-0619000 PHONE: (410) 535-4000 | Adult Full-Day | M/F | 10 | 09/11/2000 | 12/22/2003 |
| | | Adolescent Full-Day | M/F | 10 | | |
| PHP | dba Potomac Ridge Behavioral Health Adventist Healthcare Inc. 14901 Broschart Road Rockville, MD 20850 EIN: 52-1532556 PHONE: (301) 251-4500 | Adolescent Half Day | M/F | 25 | 11/04/1994 | 01/10/2002 |
| PHP | dba Sheppard & Enoch Pratt Hospital 6501 North Charles Street Baltimore, MD 21204 EIN: 52-0591684 PHONE: (410) 938-3000 | Adult Dissociative Disorders Full Day | M/F | 15 | 08/12/1994 | 05/31/2002 |
| | | Geriatric Full Day | M/F | 8 | | |
| | | Child/Adolescent Full Day | M/F | 18 | | |
| | | Adult Psychiatric Full Day | M/F | 36 | | |
| | | Adult Dual Diagnosis Full Day | M/F | 15 | | |
| PHP | dba St. Joseph Medical Center, Inc. St. Joseph Medical Center, Inc. 7601 Osler Drive Towson, MD 21204 EIN: 52-0591461 PHONE: (410) 337-1580 | Adult General Psychiatry Full Day | M/F | 10 | 02/20/2001 | 03/05/2004 |
| | | Adoles/Adult Eating Disorders Full Day | M/F | 17 | | |
| PHP | dba St. Mary's Hospital Behavioral Health Services 25500 Point Lookout Road Leonardtown, MD 20650 EIN: 52-0619006 PHONE: (301) 475-6227 | Adult Full Day | M/F | 12 | 12/06/1999 | 12/06/2002 |
| | | Adult Half Day | M/F | 12 | | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|--|---|------------|----------|--------------|------------|
| MI | MICHIGAN | | | | | |
| PHP | dba Havenwyck Hospital Havenwyck Hospital 1525 University Drive Auburn Hills, MI 48326 EIN: 38-2409580 PHONE: (248) 373-9200 | Adult Full Day Child/Adolescent Half Day | M/F M/F | 14 24 | 09/24/1997 | 10/02/2003 |
| PHP | dba Providence Hospital and Medical Centers 16001 West Nine Mile Southfield, MI 48075-4854 EIN: 38-1358212 PHONE: (248) 849-3306 | Adult Full Day | M/F | 32 | 09/09/2002 | |
| PHP | dba St. John Macomb Hospital 27550 Schoenherr Suite 250 Warren, MI 48088 EIN: 38-3322109 PHONE: (586) 582-7950 | Adult PHP Full Day | M/F | 56 | 09/09/2002 | |
| MO | MISSOURI | | | | | |
| PHP | dba Centrec Care, Inc. 1030 Woodcrest Terrace Drive St. Louis, MO 63141 EIN: 43-1428398 PHONE: (314) 991-5388 | Adult Psychiatric Full-Day Adult Dual Diagnosis Full-Day | M/F M/F | 10 10 | 05/09/2002 | |
| MS | MISSISSIPPI | | | | | |
| PHP | dba Memorial Behavioral Health Memorial Hospital at Gulfport 11150 Highway 49 North Suite A Gulfport, MS 39503 EIN: 64-6010232 PHONE: (228) 831-1700 | Adult Full Day Adolescent Half Day | M/F M/F | 20 20 | 11/10/1994 | 07/30/2002 |
| NC | NORTH CAROLINA | | | | | |
| PHP | dba Craven Regional Medical Center 707 Professional Drive New Bern, NC 28560 EIN: 56-0755775 PHONE: (252) 633-8204 | Adult Crossroads-Restorative Full Day | M/F | 12 | 11/08/1994 | 08/02/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|---|-------------------|-------------|--------------|------------|
| ND | NORTH DAKOTA | | | | | |
| PHP | dba Altru Health System Altru Health System 1200 South Columbine Road PO Box 6002 Grand Forks, ND 58201 EIN: 45-0310462 PHONE: (701) 780-3451 | Child Half-Day Adolesc Half-Day Adult Full-Day | M/F M/F M/F | 4 6 8 | 12/07/2000 | 11/05/2003 |
| PHP | dba St. Alexius Medical Center 900 E. Broadway Bismark, ND 58501 EIN: 45-0226711 PHONE: (701) 530-7000 | Adult Mental Illness/dual dx Full day Adolescent Mental Illness/dual Half day | M/F M/F | 30 20 | 05/06/2003 | |
| NM | NEW MEXICO | | | | | |
| PHP | dba UNM Children's Psychiatric Hospital 1001 Yale Boulevard NorthEast Albuquerque, NM 87131 EIN: 85-6000642 PHONE: (505) 272-2890 | Child Chaco Half Day Preadolescent Hokona Half Day Adolescent La Luz Half Day | M/F M/F M/F | 9 9 9 | 12/24/1998 | 01/30/2002 |
| OH | OHIO | | | | | |
| PHP | dba Kettering Youth Services Sycamore Hospital 5350 Lamme Road Dayton, OH 45439 EIN: 31-0938986 PHONE: (937) 534-4600 | child/adolescent Half day PHP | M/F | 10 | 03/01/2004 | |
| PHP | dba Youth Challenges Mental Health Services for Clark County, Inc. 924 East Home Road Springfield, OH 45504 EIN: 31-0787073 PHONE: (937) 390-8004 | Child/Adolescent Full Day | M/F | 28 | 04/27/1994 | 12/05/2002 |
| PA | PENNSYLVANIA | | | | | |
| PHP | dba Foundations Behavioral Health Delaware Valley Mental Health Foundation 833 East Butler Avenue Doylestown, PA 18901 EIN: 23-6299881 PHONE: (215) 345-0444 | Adolescent Full-Day Child Full-Day | M/F M/F | 20 20 | 07/26/2001 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|--|--|------------|----------|--------------|------------|
| PR | PUERTO RICO | | | | | |
| PHP | dba Instituto Panamericano de Caguas First Hospital Panamericano, Inc. M-11 Robles Street Villa Turabo Caguas, PR 00725 EIN: 66-0490148 PHONE: (787) 744-0222 | Caguas Adult Dual Diagnosis Full-Day | M/F | 20 | 04/29/2002 | |
| PHP | dba Instituto Panamericano de Humacao First Hospital Panamericano, Inc. State Road 924 HC-03 Box 5541 KM 1.8 Pitahaya Ward Humacao, PR 00791 EIN: 66-0490148 PHONE: (787) 285-1910 | Humacao Adult Dual Diagnosis Full-Day | M/F | 20 | 04/29/2002 | |
| PHP | dba Instituto Panamericano de Manati First Hospital Panamericano, Inc. State Road No. 2, KM 46.1 Campo Alegre Ward Manati, PR 00674 EIN: 66-0490148 PHONE: (787) 854-0001 | Manati Adult Dual Diagnosis Full-Day | M/F | 20 | 04/29/2002 | |
| PHP | dba Instituto Panamericano de Ponce First Hospital Panamericano, Inc. Second Floor Lifetime Building Ponce by Pass Ponce, PR 00731 EIN: 66-0490148 PHONE: (787) 259-1080 | Ponce Adult Dual Diagnosis Full-Day | M/F | 20 | 04/29/2002 | |
| PHP | dba Instituto Psicoterapeutico de PR- Hato Rey Instituto Psicoterapeutico de PR, Hato Rey Hostos 431-435 Hato Rey, PR 00918 EIN: 66-0487547 PHONE: (787) 753-9515 | Adult Day Program Full-Day Adolesc/Adult Evening Program Full-Day | M/F M/F | 30 30 | 10/27/2000 | 09/08/2003 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|----------------------|--|---|---------------|------------|---------------------|---------------|
| SC | SOUTH CAROLINA | | | | | |
| PHP | dba Palmetto Richland Springs Palmetto Richland Springs PHP 11 Richland Medical Park Columbia, SC 29203 EIN: 58-2296052 PHONE: (803) 434-4800 | Adult Full-Day Adult Half-Day | M/F M/F | 10 4 | 01/30/2001 | 12/29/2003 |
| TN | TENNESSEE | | | | | |
| PHP | dba Lakeside Behavioral Health System UHS of Lakeside, Inc. 2911 Brunswick Road Memphis, TN 38133 EIN: 23-3044425 PHONE: (901) 377-4797 | Brunswick Adolescent Half Day Adult Full Day | M/F M/F | 30 24 | 09/29/1993 | 09/04/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|------------------------------------|--------|-----|--------------|------------|
| TX | TEXAS | | | | | |
| PHP | dba Alternatives Centre for Behavioral Health El Paso Psychiatric Associates, PA 5001 Alabama Street El Paso, TX 79930 EIN: 74-2726933 PHONE: (915) 565-4800 | Adult Psychiatric Full Day | M/F | 28 | 03/29/1999 | 05/14/2001 |
| | | Adolescent Dual Diagnosis Half Day | M/F | 10 | | |
| PHP | dba Laurel Ridge Treatment Center Texas Laurel Ridge Hospital 17720 Corporate Woods Drive San Antonio, TX 78259 EIN: 43-2002326 PHONE: 210-491-9400 | Adult Full Day | M/F | 20 | 11/09/1993 | 02/11/2002 |
| | | Adult Half Day | M/F | 20 | | |
| | | Adolescent Full Day | M/F | 10 | | |
| | | Adolescent Half Day | M/F | 10 | | |
| | | Child Full Day | M/F | 5 | | |
| | | Child Half Day | M/F | 5 | | |
| PHP | dba Metroplex Pavilion Metroplex Health System, Inc. 2201 South Clear Creek Road Killeen, TX 76549 EIN: 74-2225672 PHONE: (254) 628-1000 | Child and Adolescent PHP/HALF-DAY | M/F | 20 | 01/03/2003 | |
| PHP | dba Mission Vista Hospital RHIC San Antonio 14747 Jones Maltsberger Road San Antonio, TX 78247 EIN: 74-2611258 PHONE: (210) 490-0000 | Adult Full-Day PHP | M/F | 24 | 12/19/2000 | 11/26/2003 |
| PHP | dba Southwest Mental Health Center 8535 Tom Slick Drive San Antonio, TX 78229-3363 EIN: 74-1153067 PHONE: (210) 616-0300 | Child and Adolescent Half Day | M/F | 16 | 04/07/1994 | 03/07/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|---|------------|----------|--------------|------------|
| VA | VIRGINIA | | | | | |
| PHP | dba Snowden at Fredericksburg Snowden Services, Inc. 1200 Sam Perry Blvd Fredericksburg, VA 22401 EIN: 54-1552324 PHONE: (540) 741-3900 | Adult Full-Day PHP Adolescent Full-Day PHP | M/F M/F | 25 25 | 11/18/2003 | |
| PHP | dba Southside Outpatient Behavioral Health Southside Regional Medical Center 3233 Boulevard, Suite C Colonial Heights, VA 23834 EIN: 02-0691413 PHONE: (804) 520-4676 | Adult PHP Full Day | M/F | 30 | 01/10/2000 | 11/26/2002 |
| PHP | dba Virginia Beach Psychiatric Center First Hospital Corporation of Virginia Beach 1100 First Colonial Road Virginia Beach, VA 23454 EIN: 54-1414205 PHONE: (757) 496-6000 | Adult Full Day | M/F | 15 | 12/12/1994 | 03/03/2003 |
| AR | ARKANSAS | | | | | |
| RTC | dba BHC Pinnacle Pointe Hospital 11501 Financial Center Parkway Little Rock, AR 72211 EIN: 62-1658502 PHONE: (501) 223-3322 | CITC-child Adolescent | M/F M/F | 16 22 | 07/22/1994 | 10/15/2002 |
| CA | CALIFORNIA | | | | | |
| RTC | dba San Diego Center For Children 3004 Armstrong Street (physical) 3002 Armstrong Street (mailing) San Diego, CA 92111-5798 EIN: 95-1661089 PHONE: (858) 277-9550 | ITP Child/Preadolescent | M/F | 16 | 11/11/1968 | 04/26/2001 |
| CO | COLORADO | | | | | |
| RTC | dba Cedar Springs Behavioral Health Systems, Inc PSI Cedar Springs Hospital, Inc. 2135 Southgate Road Colorado Springs, CO 80906 EIN: 74-3081810 PHONE: (719) 633-4114 | Mountain View Place I Child/Adolescent | M/F | 14 | 10/19/1990 | 12/11/2001 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|--|--|---------------|----------------|--------------|------------|
| FL | FLORIDA | | | | | |
| RTC | dba Gulf Coast Treatment Center Gulf Coast Youth Services 1015 Mar Walt Drive Fort Walton Beach, FL 32547 EIN: 56-1341134 PHONE: (850) 863-4160 | Gulf Coast Treatment Center RTC | M/F | 24 | 08/17/1998 | 09/12/2003 |
| RTC | dba LaAmistad Behavioral Health Services 1650 Park Avenue North Maitland, FL 32751 EIN: 58-1791069 PHONE: 407-647-0660 | Vida Adolescent Boys Bonita Children Bella Adolescent Girls | M M/F F | 16 8 16 | 07/23/1999 | 04/04/2002 |
| RTC | dba Manatee Palms Youth Services Ramsay Youth Services of Florida, Inc. 4480 51st Street West Bradenton, FL 34210 EIN: 65-0816927 PHONE: (941) 792-2222 | New Day Unit (male) PREP Male Sexual Offenders Unit PALMS Adolescent Male Unit | M M M | 13 17 30 | 02/13/1993 | 12/02/2002 |
| RTC | dba Ten Broeck Hospital -- Jacksonville 6300 Beach Blvd. Jacksonville, FL 32216 EIN: 59-3568978 PHONE: (904) 724-9202 | Residential Treatment Center | M/F | 18 | 04/29/2003 | |
| GA | GEORGIA | | | | | |
| RTC | dba Inner Harbour Inner Harbour Inc. 4685 Dorsett Shoals Rd. Douglasville, GA 30135 EIN: 58-0873694 PHONE: (770) 942-2391 | Adolescent Boys, Unit I Adolescent Girls, Unit IV | M F | 15 15 | 04/30/1997 | 02/06/2003 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|----------------------|---|----------------------------------|---------------|------------|---------------------|---------------|
| HI | HAWAII | | | | | |
| RTC | dba Kahi Mohala Sutter Health Pacific 91-2301 Fort Weaver Road Ewa Beach, HI 96706 EIN: 99-0298651 PHONE: (808) 671-8511 | Children/Adolescent RTC | M/F | 8 | 09/16/1999 | 08/23/2002 |
| RTC | dba Queen's Medical Center/Family Treatment Ctr, The The Queen's Healthcare System 1301 Punchbowl Honolulu, HI 96813 EIN: 99-0073524 PHONE: (808) 538-9011 | Child RTC Adolescent RTC | M/F M/F | 8 16 | 04/08/2003 | |
| ID | IDAHO | | | | | |
| RTC | dba Intermountain Hospital BHC Intermountain Hospital, Inc. 303 N. Allumbaugh Street Boise, ID 83704 EIN: 62-1658493 PHONE: (208) 377-8400 | Adolescent CRC | M/F | 70 | 03/13/1984 | 02/17/2004 |
| IN | INDIANA | | | | | |
| RTC | dba BHC Meadows Hospital Bloomington Meadows GP 3600 North Prox Road Bloomington, IN 47404 EIN: 35-1858510 PHONE: (812) 331-8000 | Child/Adolescent Psychiatric RTC | M/F | 28 | 05/26/2000 | 01/20/2003 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|----------------------|---|--|--------------------------|------------------------|---------------------|-------------------|
| KY | KENTUCKY | | | | | |
| RTC | dba Ten Broeck Hospital at Dupont Ten Broeck Hospital at Dupont 1405 Browns Lane Louisville, KY 40207 EIN: 59-3658521 PHONE: (502) 896-0495 | Child RTC | M/F | 14 | 12/18/2003 | |
| RTC | dba Ten Broeck Hospital-Louisville Kentucky United Medical Corporation 8521 LaGrange Road Louisville, KY 40242 EIN: 59-2216051 PHONE: (502) 426-6380 | Adolescent | M/F | 40 | 08/26/2002 | |
| LA | LOUISIANA | | | | | |
| RTC | dba DePaul/Tulane Behavioral Health Center University Healthcare Systems 1040 Calhoun Street New Orleans, LA 70118 EIN: 62-1596506 PHONE: (504) 899-8282 | Child Adolescent | M/F M/F | 10 10 | 09/01/1983 | 07/08/2002 |
| MT | MONTANA | | | | | |
| RTC | dba Shodair Children's Hospital Montana Children's Home and Hospital 2755 Colonial Drive Helena, MT 59601 EIN: 81-0231789 PHONE: (406) 444-7500 | Adolescent Unit-West Adolescent Unit-East | M/F M/F | 20 22 | 08/25/2003 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|----------------------|---|--|--------------------|------------------|---------------------|-------------------|
| NV | NEVADA | | | | | |
| RTC | dba Spring Mountain Treatment Center Keystone Nevada, LLC 7000 West Spring Mountain Road Las Vegas, NV 89117 EIN: 62-1838855 PHONE: (702) 873-2400 | Male Sexual Offenders-- East Unit Adolescent West Unit -- male and female | M M/F | 28 44 | 11/12/2003 | |
| RTC | dba Willow Springs Center Willow Springs, LLC. 690 Edison Way PO Box 30012 Reno, NV 89502 EIN: 62-1814471 PHONE: (775) 858-3303 | Child Adolescent | M/F M/F | 14 60 | 05/08/1990 | 07/19/2001 |
| PA | PENNSYLVANIA | | | | | |
| RTC | dba Foundations Behavioral Health Delaware Valley Mental Health Foundation 833 East Butler Avenue Doylestown, PA 18901 EIN: 23-6299881 PHONE: (215) 345-0444 | Redwood Lodge Adolescent | M/F | 10 | 05/17/1999 | 04/23/2002 |
| PR | PUERTO RICO | | | | | |
| RTC | dba First Hospital Panamericano, Inc. State Road 787 Km. 1.5 P.O. Box 1400 Cidra, PR 00739 EIN: 66-0490148 PHONE: (787) 739-5555 | Adolescent | M/F | 22 | 06/20/2002 | |
| TN | TENNESSEE | | | | | |
| RTC | dba Compass Intervention Center Keystone Memphis, LLC 7900 Lowrance Road Memphis, TN 38125 EIN: 62-1837606 PHONE: (901) 758-2002 | Child RTC (Explorers) Adolescent RTC | M/F M/F | 16 48 | 06/10/2003 | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|---------------------------------|--------|-----|--------------|------------|
| TX | TEXAS | | | | | |
| RTC | dba Laurel Ridge Treatment Center Texas Laurel Ridge Hospital 17720 Corporate Woods Drive San Antonio, TX 78259 EIN: 43-2002326 PHONE: 800-624-7975 | San Gabriel Child Unit | M/F | 20 | 01/01/1968 | 06/23/2003 |
| | | Lavaca Adolescent Unit | M/F | 20 | | |
| RTC | dba Meridell Achievement Center 12550 West Hwy 29 (Physical) (mail) PO Box 87 Liberty Hill, TX 78642 EIN: 74-1655289 PHONE: (800) 366-8656 | Child Neuro / Liberty Hall | M/F | 24 | 10/10/1968 | 07/17/2003 |
| | | Adolescent Neuro / Liberty Hall | M/F | 40 | | |
| | | Adolescent Neuro / Ranch House | M/F | 16 | | |
| | | Adolescent Psych / Bunk House | M/F | 16 | | |
| | | Adolescent Psych / La Casa | M/F | 16 | | |
| RTC | dba Oaks Treatment Center, The Texas Oaks Psychiatric Hospital, LP 1407 West Stassney Lane Austin, TX 78745 EIN: 84-1618661 PHONE: 512-464-0400 | Canyon RTC | M/F | 24 | 01/01/1968 | 03/28/2002 |
| | | Willow Oaks Latency RTC | M/F | 12 | | |
| RTC | dba San Marcos Treatment Center Texas San Marcos Treatment Center, L.P. 120 Bert Brown Road San Marcos, TX 78666 EIN: 43-2002231 PHONE: 615-312-5700 | Adolescent Spring Hill 2 | M/F | 24 | 01/01/1968 | 08/22/2002 |
| RTC | dba Southwest Mental Health Center 8535 Tom Slick Drive San Antonio, TX 78229-3363 EIN: 74-1153067 PHONE: (210) 616-0300 | Child and Adolescent | M/F | 16 | 02/22/1983 | 03/07/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|----------------------|---|--|--------------------|------------------|---------------------|-------------------|
| VA | VIRGINIA | | | | | |
| RTC | dba Poplar Springs Hospital PSH Aquisition Corporation 350 Poplar Drive PO Box 3060 Petersburg, VA 23805 EIN: 54-1819979 PHONE: (804) 733-6874 | Adol Female RTC (Poplar Springs Hospita) Adol Male RTC (Poplar West Campus) | F M | 36 36 | 06/24/1993 | 01/23/2003 |
| RTC | dba The Pines -- Kempsville The Pines Residential Treatment Center 860 Kempsville Road Norfolk, VA 23502 EIN: 54-1465094 PHONE: (757) 461-4565 | Child Adolescent | M/F M/F | 23 24 | 11/27/2000 | 11/11/2003 |
| WA | WASHINGTON | | | | | |
| RTC | dba Tamarack Center 2901 West Fort George Wright Drive Spokane, WA 99224 EIN: 91-1216841 PHONE: (509) 326-8100 | Adolescent | M/F | 14 | 12/22/1995 | 01/29/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|---|-------------------|---------------|--------------|------------|
| AL | ALABAMA | | | | | |
| SUDRF | dba Bradford Health Services - Auburn/Opelika Bradford Health Services 2210B Gateway Drive Opelika, AL 36801 EIN: 63-1198286 PHONE: (334) 749-3445 | Adult Evening Sub Use Partial Half-Day | M/F | 8 | 01/07/2002 | |
| SUDRF | dba Bradford Health Services - Birmingham Bradford Health Services 631 Beacon Parkway West Suite 211 Birmingham, AL 35209 EIN: 63-1198286 PHONE: (205) 942-3200 | Adult Half Day Evening Sub Use Partial Adol Half Day Evening Sub Use Partial | M/F M/F | 14 8 | 10/08/1998 | 12/18/2001 |
| SUDRF | dba Bradford Health Services - Dothan Bradford Health Services 1609 West Main Street Suite 103 Dothan, AL 36301 EIN: 63-1198286 PHONE: (334) 671-1677 | Adult Half Day Evening Sub Use Partial Adol Half Day Evening Sub Use Partial | M/F M/F | 12 6 | 12/18/1998 | 12/18/2001 |
| SUDRF | dba Bradford Health Services - Huntsville Bradford Health Services 2337 Whitesburg Drive Huntsville, AL 35801 EIN: 63-1198286 PHONE: (256) 536-9407 | Adult Evening Half-Day Sub Use Partial Adol Evening Half-Day Sub Use Partial | M/F M/F | 24 6 | 10/07/2002 | |
| SUDRF | dba Bradford Health Services - Huntsville Lodge Bradford Health Services 1600 Browns Ferry Road Madison, AL 35758 EIN: 63-1198286 PHONE: (256) 461-7272 | Adolescent/Adult Detox Adolescent Full Day Sub Use Partial Adult Full Day Sub Use Partial | M/F M/F M/F | 8 16 16 | 11/29/1993 | 12/18/2001 |
| SUDRF | dba Bradford Health Services - Mobile Bradford Health Services 1000 Hillcrest Road Suite 304 Mobile, AL 36695 EIN: 63-1198286 PHONE: (251) 633-0900 | Adult Evening Half-Day Sub Use Partial Adol Evening Half-Day Sub Use Partial | M/F M/F | 16 6 | 11/08/1998 | 12/18/2001 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|---|--|-------------------------------------|-------------------|-------------------|
| AL | ALABAMA | | | | | |
| SUDRF | dba Bradford Health Services - Montgomery Bradford Health Services 386 St. Luke Drive Montgomery, AL 36117 EIN: 63-1198286 PHONE: (334) 244-0702 | Adult Evening Half-Day Sub Use Partial Adol Evening Half-Day Sub Use partial | M/F M/F | 16 6 | 01/07/2002 | |
| SUDRF | dba Bradford Health Services - Tuscaloosa Bradford Health Services 515 Energy Center Boulevard Northport, AL 35473 EIN: 63-1198286 PHONE: (205) 750-0227 | Adult Evening Half-Day Sub Use Partial Adol Evening Half-Day Sub Use Partial | M/F M/F | 24 6 | 12/14/1998 | 12/18/2001 |
| SUDRF | dba Bradford Health Services - Warrior Lodge Bradford Health Services 1189 Albritton Road P.O. Box 129 Warrior, AL 35180 EIN: 63-1198286 PHONE: (205) 647-1945 | Adult Full-Day Sub Use Partial Adult Detoxification Adult Inpatient Rehabilitation | M/F M/F M/F | 24 12 40 | 02/04/1993 | 12/18/2001 |
| CA | CALIFORNIA | | | | | |
| SUDRF | dba New Bridge Foundation New Bridge Foundation, Inc. 1816 Scenic Avenue Berkeley, CA 94704 EIN: 23-7131209 PHONE: (510) 548-7270 | Bridge 2000 detox/inpt rehab Bridge 2000 sub use partial full day | M/F M/F | 36 30 | 02/18/2003 | |
| SUDRF | dba Sharp Vista Pacifica 7989 Linda Vista Road San Diego, CA 92111 EIN: 95-3782169 PHONE: (858) 637-6920 | Adult Inpatient Rehabilitation Adult Full Day Sub Use Partial | M/F M/F | 8 12 | 10/05/1993 | 01/09/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|--|--|--------|-----|--------------|------------|
| FL | FLORIDA | | | | | |
| SUDRF | dba Friary of Lakeview, The 4400 Hickory Shores Boulevard Gulf Breeze, FL 32563 EIN: 59-0737872 PHONE: (850) 932-9375 | Adult Detox | M/F | 10 | 09/17/1993 | 05/22/2002 |
| | | Adult Rehab | M/F | 20 | | |
| | | Adult Full Day Sub Use Partial | M/F | 8 | | |
| SUDRF | dba Twelve Oaks Alcohol & Drug Treatment Center Bowling Green Inn of Pensacola 2068 Healthcare Ave. Navarre, FL 32566 EIN: 58-1795523 PHONE: (850) 939-1200 | Adolescent Full Day Sub Use Partial | M/F | 16 | 07/19/1993 | 03/17/2003 |
| | | Adult Detox/Rehabilitation | M/F | 6 | | |
| | | Adult Full Day Sub Use Partial | M/F | 36 | | |
| GA | GEORGIA | | | | | |
| SUDRF | dba Recovery Place, Inc. Recovery Place, Inc. 835 East 65th Street Savannah, GA 31405 EIN: 57-0864414 PHONE: (912) 355-1440 | Adult Substance Use Partial Full-Day | M/F | 25 | 11/05/2003 | |
| | | Adol Substance Use Partial Full Day | M/F | 25 | | |
| HI | HAWAII | | | | | |
| SUDRF | dba Hina Mauka Alcoholic Rehabilitation Services of Hawaii, Inc. 45-845 Po'okela Street Kaneohe, HI 96744 EIN: 99-0173356 PHONE: (808) 236-2600 | Adult Inpatient Rehab | M/F | 44 | 12/05/2000 | 10/27/2003 |
| | | Adult Substance Abuse Partial Full-Day | M/F | 20 | | |
| MA | MASSACHUSETTS | | | | | |
| SUDRF | dba Gosnold on Cape Cod (Falmouth) Cape Cod Alcoholism Intervention & Rehab Unit, Inc 200 Ter Heun Drive P.O. Box 929 Falmouth, MA 02541 EIN: 04-2502970 PHONE: (508) 540-6550 | Adolesc & Adult Detoxification | M/F | 30 | 08/24/1993 | 04/25/2002 |
| | | Adolesc & Adult Inpatient Rehabilitation | M/F | 20 | | |
| | | Adolesc & Adult Half Day Sub Use Partial | M/F | 15 | | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|----------------------|--|--|---------------|------------|---------------------|-------------------|
| MI | MICHIGAN | | | | | |
| SUDRF | dba Michiana Addictions and Prevention Services | MAPS Adult Inpatient Rehab | M/F | 18 | 07/21/2003 | |
| | Michiana Addictions and Prevention Services | MAPS Adult Detox Unit | M/F | 7 | | |
| | 1910 Shaffer Street | | | | | |
| | Kalamazoo, MI 49048 | | | | | |
| | EIN: 38-1961500 | | | | | |
| | PHONE: (269) 382-9820 | | | | | |
| NC | NORTH CAROLINA | | | | | |
| SUDRF | dba Roxie Avenue Center | Adult Detox | M/F | 7 | 06/14/2000 | 04/24/2003 |
| | Cumberland County Mental Health Center | | | | | |
| | 1724 Roxie Avenue | | | | | |
| | Fayetteville, NC 28304 | | | | | |
| | EIN: 56-6000291 | | | | | |
| | PHONE: (910) 484-1212 | | | | | |
| SUDRF | dba Wilmington Treatment Center | Adult Inpatient Detox/Rehabilitation | M/F | 44 | 05/05/2003 | |
| | Wilmington Treatment Center, Inc. | Adult Sub Use Partial Full Day | M/F | 28 | | |
| | 2520 Troy Drive | | | | | |
| | Wilmington, NC 28401 | | | | | |
| | EIN: 54-1436102 | | | | | |
| | PHONE: (910) 762-2727 | | | | | |
| NJ | NEW JERSEY | | | | | |
| SUDRF | dba Lighthouse at Mays Landing | Adult Rehabilitation and Detoxification | M/F | 18 | 03/13/2001 | 03/08/2004 |
| | Recovery Services of New Jersey, Inc. | | | | | |
| | 5034 Atlantic Avenue | | | | | |
| | Mays Landing, NJ 08330 | | | | | |
| | EIN: 23-2437064 | | | | | |
| | PHONE: (609) 625-4900 | | | | | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|--|--|--------|-----|--------------|------------|
| PA | PENNSYLVANIA | | | | | |
| SUDRF | dba Cove Forge Behavioral Health System/Williamsburg New Beginnings Road PO Box B Williamsburg, PA 16693 EIN: 22-3168733 PHONE: (800) 873-2131 | Adult Inpatient Rehabilitation | M/F | 62 | 12/17/2002 | |
| | | Adult Detox | M/F | 8 | | |
| SUDRF | dba Marworth Treatment Center Geisinger Health System Foundation Lily Lake Road P.O. Box 36 Waverly, PA 18471 EIN: 23-2171417 PHONE: (800) 442-7722 | Adult Detoxification Male/Female | M/F | 17 | 02/19/2003 | |
| | | Adult Inpatient Rehabilitation Male Unit | M | 40 | | |
| | | Adult Inpatient Rehab Female Unit | F | 20 | | |
| SUDRF | dba White Deer Run/Allenwood 360 White Deer Run Road P.O. Box 97 Allenwood, PA 17810 EIN: 22-3168733 PHONE: (800) 255-2335 | Adult Detox | M/F | 23 | 12/12/2002 | |
| | | Adolescent Inpatient Rehab | M/F | 16 | | |
| | | Adult Inpt Rehab | M/F | 24 | | |
| | | Adolescent Detox | M/F | 3 | | |
| SC | SOUTH CAROLINA | | | | | |
| SUDRF | dba Earle E. Morris Jr Alcohol & Drug Addiction TC Earle E. Morris, Jr. 610 Faison Drive mail:1800 Colonial Dr zip29202 Columbia, SC 29203 EIN: 57-6000922 PHONE: (803) 935-7103 | Adult Team A, Female Inpt Rehab/detox | F | 44 | 04/27/1993 | 05/29/2003 |
| | | Adult Team C, Male Inpt Rehab/detox | M | 36 | | |
| | | Adult Team D, Male Inpt Rehab/detox | M | 34 | | |
| | | Adult Team E, Dual Diag Inpt Rehab/detox | M/F | 20 | | |
| | | Adult Infirmary/Admission & Detox | M/F | 12 | | |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software

TRICARE Monthly Certified Facility Report

| Facility Type | Facility Name & Address | Program | Gender | Cap | Initial Cert | Recert |
|---------------|---|--|--------|-----|--------------|------------|
| TN | TENNESSEE | | | | | |
| SUDRF | dba Bradford Health Services - Clarksville Bradford Health Services - Clarksville 235 A Dunbar Cave Road Clarksville, TN 37043 EIN: 63-1198286 PHONE: (931) 542-9816 | Adult Half Day Sub Use Partial | M/F | 6 | 04/30/2003 | |
| | | Adolescent Half Day Sub Use partial | M/F | 6 | | |
| SUDRF | dba Cornerstone of Recovery, Inc.-1120 Topside Rd Cornerstone of Recovery, Inc 1120 Topside Road Louisville, TN 37777 EIN: 62-1400167 PHONE: (865) 970-7747 | Young Adult Inpatient Program | M/F | 16 | 03/15/2004 | |
| | | Adult Relapse Recovery Program | M/F | 18 | | |
| SUDRF | dba Cornerstone of Recovery, Inc.-1214 Topside Rd. Cornerstone of Recovery, Inc. 1214 Topside Road Louisville, TN 37777 EIN: 62-1400167 PHONE: (865) 970-7747 | Adult Inpatient program | M/F | 34 | 03/15/2004 | |
| TX | TEXAS | | | | | |
| SUDRF | dba Shoreline, Inc. Shoreline, Inc. 1220 Gregory Street Taft, TX 78390 EIN: 74-2520130 PHONE: (361) 528-3356 | Adolescent Boys Rehab Unit | M | 15 | 05/11/2000 | 01/15/2004 |
| | | Adolescent Girls Rehab Unit | F | 15 | | |
| | | Adolescent half-day sub use partial | M/F | 12 | | |
| WA | WASHINGTON | | | | | |
| SUDRF | dba Inland Professional Services - Spokane Spokane Behavioral Health Care, Inc. 104 South Freya YFB- #125 , Suite 207 Spokane, WA 99202 EIN: 91-1432974 PHONE: (509) 534-8713 | Adult Half Day Evening Sub Use Partial | M/F | 12 | 03/14/1995 | 06/11/2002 |

dba = does business as. If listed, the second name is the facility's legal name, if it differs from the dba.

TRICARE Certified Facilities Through March 31, 2004

This report was prepared by Colorado Foundation for Medical Care, Denver, Colorado, using CFMC TRICARE Mental Health Facility Certification System software